

Application Data Sheet**Application Information**

Application Type:: Regular  
Subject Matter:: Utility  
Suggested Classification::  
Suggested Group Art Unit::  
CD-ROM or CD-R?:: None  
Number of CD disks::  
Number of Copies of CDs::  
Sequence Submission?:: None  
Computer Readable Form (CRF):: No  
Number of copies of CRF:: 0  
Title:: ACETABULAR IMPLANT AND METHOD  
FOR THE PRODUCTION OF SAID  
IMPLANT  
Attorney Docket Number:: 0512-1319  
Request for Early Publication?:: No  
Request for Non-Publication?:: No  
Suggested Drawing Figure::  
Total Drawing Sheets:: 4  
Small Entity?:: No  
Latin Name::  
Variety Denomination Name::  
Petition Included?:: No  
Petition Type::  
Licensed US Gov't Agency::  
Contract or Grant Numbers::  
Secrecy Order in Parent Appl.?:: No

**Applicant Information**

Applicant Authority Type:: Inventor  
Primary Citizenship Country:: FRANCE  
Status:: Full Capacity  
Given Name:: BRUNO  
Middle Name::  
Family Name:: BALAY  
Name Suffix::  
City of Residence:: TREVOUX  
State or Province of  
Residence::  
Country of Residence:: FRANCE  
Street of Mailing 70, CHEMIN DES ERABLES, SAINT BERNARD  
Address::  
City of Mailing Address:: TREVOUX  
State or Province of Mailing Address::  
Country of Mailing Address:: FRANCE  
Postal or Zip Code of Mailing Address:: F-01600

Applicant Authority Type:: Inventor  
Primary Citizenship Country:: FRANCE  
Status:: Full Capacity  
Given Name:: JEAN-CLAUDE  
Middle Name::  
Family Name:: CARTILLIER  
Name Suffix::  
City of Residence:: LYON  
State or Province of  
Residence::  
Country of Residence:: FRANCE  
Street of Mailing 56, RUE PAUL SISLEY  
Address::  
City of Mailing Address:: LYON

State or Province of Mailing Address::  
Country of Mailing Address:: FRANCE  
Postal or Zip Code of Mailing Address:: F-69008

Applicant Authority Type:: Inventor  
Primary Citizenship Country:: FRANCE  
Status:: Full Capacity  
Given Name:: CLAUDE  
Middle Name::  
Family Name:: CHARLET  
Name Suffix::  
City of Residence:: SAINT DIDIER AU MONT D'OR  
State or Province of  
Residence::  
Country of Residence:: FRANCE  
Street of Mailing 77, CHEMIN DES ESSES  
Address::  
City of Mailing Address:: SAINT DIDIER AU MONT D'OR  
State or Province of Mailing Address::  
Country of Mailing Address:: FRANCE  
Postal or Zip Code of Mailing Address:: F-69370

Applicant Authority Type:: Inventor  
Primary Citizenship Country:: FRANCE  
Status:: Full Capacity  
Given Name:: JEAN-CHRISTOPHE  
Middle Name::  
Family Name:: CHATELET  
Name Suffix::  
City of Residence:: CHAZEY SUR AIN  
State or Province of  
Residence::  
Country of Residence:: FRANCE  
Street of Mailing ROUTE DE RIGNIEUX

Address::

City of Mailing Address:: CHAZEY SUR AIN

State or Province of Mailing Address::

Country of Mailing Address:: FRANCE

Postal or Zip Code of Mailing Address:: F-01150

Applicant Authority Type:: Inventor

Primary Citizenship Country:: FRANCE

Status:: Full Capacity

Given Name:: MICHEL-HENRI

Middle Name::

Family Name:: FESSY

Name Suffix::

City of Residence:: CHARLY

State or Province of

Residence::

Country of Residence:: FRANCE

Street of Mailing 55, RUE DE LA MÛRE

Address::

City of Mailing Address:: CHARLY

State or Province of Mailing Address::

Country of Mailing Address:: FRANCE

Postal or Zip Code of Mailing Address:: F-69390

Applicant Authority Type:: Inventor

Primary Citizenship Country:: GERMANY

Status:: Full Capacity

Given Name:: LOUIS

Middle Name::

Family Name:: HOVY

Name Suffix::

City of Residence:: MÜHLTAL-TRAISA

State or Province of

Residence::

Country of Residence:: GERMANY  
Street of Mailing LUDWIGSTRASSE 21A  
Address::  
City of Mailing Address:: MÜHLTAL-TRAISA  
State or Province of Mailing Address::  
Country of Mailing Address:: GERMANY  
Postal or Zip Code of Mailing Address:: 64367

Applicant Authority Type:: Inventor  
Primary Citizenship Country:: FRANCE  
Status:: Full Capacity  
Given Name:: ALAIN  
Middle Name::  
Family Name:: MACHENAUD  
Name Suffix::  
City of Residence:: LA BALME DE SILLINGY  
State or Province of  
Residence::  
Country of Residence:: FRANCE  
Street of Mailing 47, ROUTE DE LA BÂTHIE  
Address::  
City of Mailing Address:: LA BALME DE SILLINGY  
State or Province of Mailing Address::  
Country of Mailing Address:: FRANCE  
Postal or Zip Code of Mailing Address:: F-74330

Applicant Authority Type:: Inventor  
Primary Citizenship Country:: FRANCE  
Status:: Full Capacity  
Given Name:: JEAN-MARC  
Middle Name::  
Family Name:: SEMAY  
Name Suffix::  
City of Residence:: SAINT PRIEST EN JAREZ

State or Province of  
Residence::  
Country of Residence:: FRANCE  
Street of Mailing 13, RUE DE BEAUMONT  
Address::  
City of Mailing Address:: SAINT PRIEST EN JAREZ  
State or Province of Mailing Address::  
Country of Mailing Address:: FRANCE  
Postal or Zip Code of Mailing Address:: F-42270

Applicant Authority Type:: Inventor  
Primary Citizenship Country:: FRANCE  
Status:: Full Capacity  
Given Name:: LOUIS  
Middle Name::  
Family Name:: SETIEY  
Name Suffix::  
City of Residence:: GLEIZE  
State or Province of  
Residence::  
Country of Residence:: FRANCE  
Street of Mailing 1003, RUE JOSEPH REMUET  
Address:: LA RIPPE  
City of Mailing Address:: GLEIZE  
State or Province of Mailing Address::  
Country of Mailing Address:: FRANCE  
Postal or Zip Code of Mailing Address:: F-69400

Applicant Authority Type:: Inventor  
Primary Citizenship Country:: FRANCE  
Status:: Full Capacity  
Given Name:: JEAN-PIERRE  
Middle Name::  
Family Name:: VIDALAIN

Name Suffix::  
City of Residence:: ANNECY LE VIEUX  
State or Province of  
Residence::  
Country of Residence:: FRANCE  
Street of Mailing "LA BOISERIE", 8, RUE DU PONT DE THÉ  
Address::  
City of Mailing Address:: ANNECY LE VIEUX  
State or Province of Mailing Address::  
Country of Mailing Address:: FRANCE  
Postal or Zip Code of Mailing Address:: F-74940

Applicant Authority Type:: Inventor  
Primary Citizenship Country:: GERMANY  
Status:: Full Capacity  
Given Name:: ULRICH  
Middle Name::  
Family Name:: WITZEL  
Name Suffix::  
City of Residence:: WUPPERTAL  
State or Province of  
Residence::  
Country of Residence:: GERMANY  
Street of Mailing IM KÄMPCHEN 7  
Address::  
City of Mailing Address:: GLEIZE  
State or Province of Mailing Address::  
Country of Mailing Address:: FRANCE  
Postal or Zip Code of Mailing Address:: 42279

Applicant Authority Type:: Inventor  
Primary Citizenship Country:: FRANCE  
Status:: Full Capacity  
Given Name:: SYLVAIN

Middle Name::  
Family Name:: ZANELLO  
Name Suffix::  
City of Residence:: MIONS  
State or Province of  
Residence::  
Country of Residence:: FRANCE  
Street of Mailing 2, ALLÉE MAURICE DRUON  
Address::  
City of Mailing Address:: ANNECY LE VIEUX  
State or Province of Mailing Address::  
Country of Mailing Address:: FRANCE  
Postal or Zip Code of Mailing Address:: F-69780

**Correspondence Information**

Correspondence Customer 00466  
Number::

**Representative Information**

Representative Customer	00466
Number::	

**Domestic Priority Information**

Application::	Continuity Type::	Parent Application::	Parent Filing Date::
This application	National Stage of	PCT/FR2004/002045	7/29/04

**Foreign Priority Information**

Country::	Application Number::	Filing Date::	Priority Claimed::
FRANCE	0309405	7/30/03	Yes

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**Assignment Information**

Assignee Name::

Street of Mailing

Address::

City of Mailing Address::

State or Province of Mailing Address::

Country of Mailing Address::

Postal or Zip Code of Mailing Address::